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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PU030224
First Named Inventor	David Jay Duffield
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**BROADCAST CONDITIONAL ACCESS SYSTEM WITH IMPULSE PURCHASE
CAPABILITY IN A TWO-WAY NETWORK**

the specification of which (Title of the Invention).

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **Jan. 22, 2004** as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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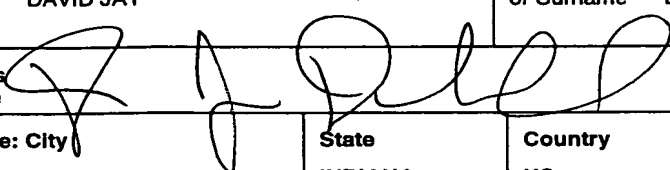
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DECLARATION — Utility or Design Patent Application

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City	State	ZIP	
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Country	Telephone	Fax	
USA	(609-734-6839)	(609) 734 -6888	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	DAVID JAY	Family Name or Surname	DUFFIELD
Inventor's Signature			Date April 19 2004
Residence: City	State	Country	Citizenship
INDIANAPOLIS	INDIANA	US	US

Mailing Address			
Mailing Address 5459 FALL CREEK ROAD			
City	State	ZIP	Country
INDIANAPOLIS	INDIANA	46220	US

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Family Name or Surname		
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship

Mailing Address			
Mailing Address			
City	State	ZIP	Country

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (11-04)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM****Application Number****Filing Date****First Named Inventor**

DAVID JAY DUFFIELD

TitleBROADCAST CONDITIONAL ACCESS SYSTEM WITH
IMPULSE PURCHASE CAPABILITY IN A TWO-WAY
NETWORK**Art Unit****Examiner Name****Attorney Docket Number**

PU030224

I hereby appoint:

☒ Practitioners at Customer Number**Customer Number 24498****OR**☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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Individual Name

Joseph J. Laks, Patent Operations

Address**Address**

P. O. BOX 5312

City

PRINCETON

State

NJ

ZIP

08543-5312

Country

USA

Telephone

609-734-6819

Fax

609-734-6888

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).***SIGNATURE of Applicant or Assignee of Record****Name**

Paul P. Kiel, Registration No. 40,677

Signature**Date**

5/25/08

Telephone

609-734-6815

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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THOMSON LICENSING**

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**THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France**

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**Joseph J. Laks
Vice President
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540**

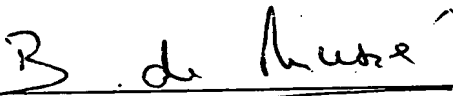
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DATED this ____14th____ day of __February__, in the year 2006.

Signature:

Typed Name As Signed:

Title:


Béatrix de Russé
Authorized Representative,
Vice-President Intellectual Property & Licensing

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**POWER OF ATTORNEY
THOMSON LICENSING**

THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France

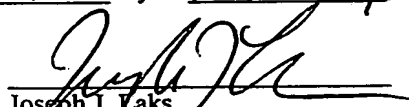
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Ronald Kolczynski - Member Patent Staff
Michael A. Pugel - Patent Agent
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

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DATED this 27th day of February, 2006.

SIGNED


Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING

WITNESS

